

**DEPARTMENT OF COMMUNITY SERVICES AND DEVELOPMENT**  
**Board Roster**  
**Exhibit D, Attachment VII**  
**CSD 188 New**

Received by CSD:

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**Board Roster**

Agency Name: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Effective Date: \_\_\_\_\_

Submitted By: \_\_\_\_\_

As per Exhibit D. Please also list any vacancies within the board itself, so that the required amount of board members is equal to the board by-laws.

Name:	Title/Position:	Address:	Phone Number:	Email:
	Executive Director			
	Board Chair			
	Additional Authorized signer of the Contract other than the above			

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